### **FEC FORM 2** STATEMENT OF CANDIDACY

RECEIVED SECRETARY OF THE SENATE PUBLIC/RECORDS

			2017 NOV 30 PH 12: 49	
(a) Name of Candidate (in full)				
Michael Starr Hopkins	Chaok if addrass	c changed	2. FEC Candidate Identification Number	
(b) Address (number and street) 56 Beacon Way Apt A02	☐ Check if address	s changed	2. FEC Candidate Identification Number	
(c) City, State, and ZIP Code Jersey City, NJ 07304			3. Is This New Statement (N) OR (A)	
Party Affiliation DEM	5. Office Sought US Senate	6. State & D NJ	istrict of Candidate	
	ESIGNATION OF PRI	NCIPAL CAMPAIC	GN COMMITTEE	
7. I hereby designate the following n	omed political committee as my	Principal Campaign Co.	mmittee for the 2018 election(s).	
NOTE: This designation should b			(year of election)	
	e nieu with the appropriate office	e listed in the instructions	·······	
(a) Name of Committee (in full)				
Michael Starr F	lopkins for S	enate		
(b) Address (number and street)				
P.O. Box 3076	, 69 Montgo	mery Stre	eet	
(c) City, State, and ZIP Code	, oo workge			
	1 07000 0000	•		
Jersey City, NJ	0/302-9990			
I hereby authorize the following n candidacy.     NOTE: This designation should b			committee, to receive and expend funds on behalf of my	
(a) Name of Committee (in full)		<u> </u>		
(a) Name of Committee (in full)				
·			2,4	
(b) Address (number and street)	•			
(c) City, State, and ZIP Code				
			and the state of the same of t	
	xamined this Statement and to t	he best of my knowledge	e and belief it is true, correct and complete.	
Signature of Candidate	1.		Date	
MILL	Hola so		11/28/2017	
1/1Chus 1/	HOPKINS	<u></u>	1172072017	
NOTE: Submission of false, erroneo	us, or incomplete information m	ay subject the person sid	gning this Statement to penalties of 52 U.S.C. §30109.	
	,			
9-00068			FEC FORM 2 (REV. 02/20	

FEC Form 2S (Revised 02/2017)

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## Optional Supplemental Page for Designation of Additional Authorized Committees

Page	of	

### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.			
	(a) Name of Committee (in full)			
	(b) Address (number and street)			
	(c) City, State, and ZIP Code			
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.			
	(a) Name of Committee (in full)			
	(b) Address (number and street)			
	(c) City, State, and ZIP Code			
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	(a) Name of Committee (in full)			
	(b) Address (number and street)			
	(c) City, State, and ZIP Code			
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	(a) Name of Committee (in full)			
	(b) Address (number and street)			
	(c) City, State, and ZIP Code			

# Faxed or Hand Delivered

HART SENATE OFFICE BUILDING SUITE 232

## 28171156828838838

United States Senate

WASHINGTION, DC 20510-7115

OFFICE OF THE SECRETARY

OFFICE-OF PUBLIC RECORDS

PHONE(202) 224-0322

4/04/15

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**SEN PATCH** 



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